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OR	L		_
Practitioner(s) named below (if more than ten patent practitioners are to be named, then a customer number must be used):			
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as attorney(s) or agent(s) to represent the undersigned before the United States Patient and Trademark Office (USPTO) in connection with any and all patient applications assigned gointy to the undersigned according to the USPTO assignment records or assignment documents attached to this form in accordance with 37 CPR 3.73(b).			
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SIGNATURE of Assignee of Record  The individual whose signature and title is supplied below is authorized to act on behalf of the assignee			
Signature A 2 010 h		Date	2 DE12009
	. // John R. Rafter		one 562-797-9012
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